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APPLICANTS

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** CONTINUING DATA *****
None

** FOREIGN APPLICATIONS *****
None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged Allowance <i>[Signature]</i> Examiner's Signature <i>[Initials]</i> Initials	STATE OR COUNTRY MA	SHEETS DRAWING 10	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 2
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